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A Study To Assess The Effectiveness Of Structured Teaching Programme On Knowledge Regarding Epidural Analgesia During Labour Among Antenatal Women In Selected Hospitals Of Thrissur District

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ABSTRACT

Labour pain is among the most intense forms of pain experienced by women, and effective pain management enhances maternal comfort and satisfaction. Epidural analgesia is considered the gold standard for labour pain relief, yet misconceptions and limited awareness restrict its use. This study assessed the effectiveness of a structured teaching program (STP) in improving knowledge of antenatal women regarding epidural analgesia. A pre-experimental one-group pre-test post-test design was conducted among 40 antenatal women in selected hospitals of Thrissur district, Kerala. Data were collected using a structured questionnaire before and after administration of the STP. Results revealed that mean knowledge scores increased significantly from 9.60 ± 3.77 (pre-test) to 15.08 ± 2.96 (post-test) (p < 0.001). Area of residence showed significant association with baseline knowledge. The study concludes that structured antenatal education effectively improves awareness of epidural analgesia and should be integrated into routine maternal health programs.

KEYWORDS

Epidural analgesia, Labour pain, Structured teaching program, Antenatal women, Knowledge.

INTRODUCTION

• Statement of the Problem:

"A study to assess the effectiveness of structured teaching program on knowledge regarding epidural analgesia during labour among antenatal women in selected hospitals of Thrissur district."

• Need for the Study:

Labour pain is one of the most intense experiences a woman undergoes. Epidural analgesia is widely recognized as the most effective form of labour analgesia, yet its use is limited by misconceptions and lack of awareness. Studies in India have shown that only a minority of pregnant women are aware of its benefits, while many hold incorrect beliefs about side effects such as paralysis or prolonged labour. Structured health education programs are an effective strategy to bridge this gap and empower women to make informed decisions during childbirth.

- Objectives:
- 1. To assess the level of knowledge regarding epidural analgesia during labour among antenatal women in selected hospitals of Thrissur district.
- 2. To assess the effectiveness of a structured teaching program on knowledge regarding epidural analgesia during labour among antenatal women in selected hospitals of Thrissur district.
- 3. To find the association between pretest knowledge score regarding epidural analgesia during labour with selected demographic variables.
 - Hypothesis:

H0: There will be no significant difference in the knowledge scores of antenatal women regarding epidural analgesia during labour before and after the structured teaching programme.

H₁: There is a significant difference in pre-test and post-test knowledge scores regarding epidural analgesia during labour among antenatal women

H₂: There is a significant association between the pre-test knowledge scores with the selected demographic variables.

METHODOLOGY

- Design: A pre-experimental one-group pre-test post-test design was used.
- Settings: The study was conducted in St. James' Hospital, Chalakudy and Taluk Headquarters Hospital, Chalakudy, Thrissur.
- Sample and sampling technique: 40 antenatal women in their third trimester, selected using convenience sampling.
- Tools and techniques: A structured knowledge questionnaire consisting of 20 multiple-choice items on labour pain, definition, procedure, advantages, side effects, and contraindications of epidural analgesia. Each correct answer scored 1; total score 0-20, interpreted as: Poor (0-4), Average (5-14), and Good (15-20).
- Data collection: After permission and informed consent, the pretest was conducted, followed by the delivery of structured teaching programme, the post test using the same questionnaire occurred on day 7.

- Validity and Reliability: Content validity established through expert review in Obstetrics and Gynecology, nursing education and research methodology. Reliability assessed using test- retest and Karl Pearson's correlation. The tool was found reliable and pilot study confirmed the feasibility.
- Analysis: Descriptive statistics summarized demographics and knowledge scores. Paired t-test assessed STP effectiveness, and chi-square tested associations with demographic variables.

RESULTS

- * Pre -test knowledge include 12.5% had poor knowledge, 77.5% average, and 10% good. Post-intervention knowledge include 0% had poor knowledge, 32.5% average, and 67.5% good.
- *Effectiveness of STP: Mean knowledge score improved significantly from 9.60 ± 3.77 to 15.08 ± 2.96 (t = -10.477, p < 0.001).
- *Association: Significant association found between pre -test knowledge and area of residence (p < 0.05). Other demographic factors showed no significant association.

DISCUSSION

The findings revealed a significant improvement in antenatal women's knowledge following the structured teaching program, consistent with similar studies in India and internationally. Misconceptions and lack of awareness remain barriers to the utilization of epidural analgesia. Educational interventions, particularly during antenatal care, empower women with accurate knowledge, reduce anxiety, and promote informed decision-making.

The significant association with area of residence highlights disparities in access to health information between rural and urban women, underscoring the need for community-based awareness programs.

CONCLUSION

The study demonstrates that structured teaching programs are effective in improving knowledge about epidural analgesia during labour among antenatal women. Integrating such programs into routine antenatal care could enhance awareness, dispel myths, and increase acceptance of safe labour pain relief methods.

Recommendations:

Incorporate structured antenatal education on labour analgesia in maternal health services.

Train nurses and midwives to deliver standardized health teaching modules.

Conduct larger studies with control groups to validate findings.

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